

**From:** Kaitlyn Stabnow  
**Sent:** Saturday, January 09, 2016 1:54 PM  
**To:** Briel, Ron  
**Subject:** Application 407

January 9th, 2016

Mr. Ron Briel, Program Manager

Division of Public Health, Licensure Unit

Nebraska Department of Health and Human Services

Lincoln, NE 68509

Dear Mr. Briel

My name is Kaitlyn Stabnow and I am a perioperative Registered Nurse. I have been working in the operating room for five years. I am responsible for care of the surgical patient before, during, and after their procedure. I work with other nurses, nurse anesthetists, surgical technologists, surgeons, and the patient to create and maintain a safe environment with favorable outcomes.

The surgical technologist is the person I work the closest with when getting ready for a surgical case. We work together to ensure the proper instrumentation and equipment is available and functioning. We open a room and ensure sterility and check the integrity of instrumentation. We review the patient and their pertinent medical history. We prep for the appropriate site and side surgery. We count our sponges, sharps, and instruments, taking great pride in the opportunity we have to care for someone's most important person. While the surgical technologist is considered under my supervision, they do not assist me like some of the opposition letters state. The surgical technologist works WITH me to assist the patient. We work together for the patient.

When I leave the room, with a patient after a case, their work does not stop. The surgical technologist is responsible for properly cleaning the surgical environment. The surgical technologist is responsible for disinfection, cleaning, and reprocessing instrumentation. This person carries the responsibility for creating the first line of defense in patient safety. There is mounds of rules, regulations, and guidelines of how sterilization and reprocessing is to be done. These mounds of rules, regulations, and guideline are changing all the time. Continuing education requirements for surgical technologists would help bridge the gap in knowledge and practice application. The knowledge that a surgical technologist is expected to possess on current requirements of sterilization, could mean the difference in a hospitals accreditation. The job, the knowledge, the responsibility, should not be taken lightly.

The new age of healthcare is upon us with surgery leading the way. The old thought process of "that's the way it's always been done" should be buried along with paper charting. Surgery is a serious place to work. We do not get to use erasers and whiteout. A wrong step might lead to a wrong site surgery or a retained surgical item. Education for surgical technologist creates this sense of importance. Individuals opposing the licensing of surgical technologist will site cost as

a reason. However, it is much cheaper to train a surgical technologist that is certified and familiar with the environment, instrumentation, and surgical cases, than to train a person that was hired from the local department store, who does not know what a "5cc syringe" is. Yes, this was one of my real experiences. Also, its fare to argue that hiring a certified technologist leads to longevity at a job, than hiring "off the street", with no previous exposure to the surgical environment. This is also a cost reduction. Surgery is not for the faint hearted. Education and knowledge is power. Providing surgical technologist with a certification or licensure, would lead to increased job satisfaction and pride in the meaningful work being performed.

Finally, when I examine the letters of opposition and the letters of support, I find an undeniable trend. The people that are in favor of the 407 application are the surgical technologists of the state. These are the people that are doing the job and they are asking that the state hold them accountable. They are asking for a license and education requirements. Why would the state deny a request to hold them to a higher standard?

Thank you for taking the time to read my letter of full support of application 407. Your time is appreciated. As you embark on this important decision, I challenge you to ask yourself, Who do you want taking care of your most important person? Someone with no formal training or a certified professional?

Sincerely,

Kaitlyn Stabnow RN, BSN

Alliance, NE